## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

20206-16 (1900-3324)

| CLAIMS AS FILED - PART I<br>(Column 1)   |  |   |       |                              |                              | mn 2)            |       | SMALL ENTITY TYPE   |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |
|--|--|---|-------|------------------------------|------------------------------|------------------|-------|---------------------|------------------------|-------------------------------|---------------------|------------------------|
| TC   | TAL CLAIMS                                     |   | 63    |                              |                              |                  |       | RATE                | FEE                    |                               | RATE                | FEE                    |
| FOR NUMBER FILED   |  |   |       |                              | NUMBE                        | ER EXTRA         |       | BASIC FEE           | 355.00                 | OR                            | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS 63 minus 20=   |  |   |       |                              | * 4                          | 3                |       | X\$ 9=              |                        | OR                            | X\$18=              | 7.74                   |
| INDEPENDENT CLAIMS 8 minus 3 =   |  |   |       |                              | 5                            |                  |       | X40=                |                        | OR                            | X80=                | 400                    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |       |                              |                              |                  |       | +135=               |                        | OR                            | +270=               | - 100                  |
| * If the difference in column 1 is less than zero, enter   |  |   |       |                              |                              | olumn 2          |       | TOTAL               |                        | OR                            | TOTAL               | 1,884                  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |       |                              |                              |                  |       | SMALL E             | NTITY                  | OR                            | OTHER<br>SMALL      | THAN                   |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGH<br>NUM<br>PREVI<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus | **                           |                              | =                |       | X\$ 9=              |                        | OR                            | X\$18=              |                        |
| AME  | independent                                    | * .                                       | Minus | ***                          | T OL A 154                   | =                |       | X40=                |                        | OR                            | X80=                |                        |
| FIRST PRESENTATION OF MOLTIPLE DEPENDENT CLA   |  |   |       |                              |                              |                  | ]     | +135=               |                        | OR                            | +270=               |                        |
| Best Available Copy  |  |   |       |                              |                              |                  |       | TOTAL<br>ADDIT. FEE | <del></del>            | OR                            | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |       |                              |                              |                  |       |                     |                        |                               |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | NUN<br>PREVI                 | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus | **                           |                              | =                |       | X\$ 9=              |                        | OR                            | X\$18=              |                        |
| ME   | Independent                                    | *   | Minus | ***                          |                              | <u> </u> =       |       | X40=                |                        | OR                            | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA   |  |   |       |                              |                              |                  |       | +135=               |                        | OR                            | +270=               |                        |
|  |  |   |       |                              |                              |                  |       | TOTAL               |                        | OR                            | TOTAL               |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |       |                              |                              |                  |       | ADDIT. FEE          |                        | <u> </u>                      | ADDIT. FEE          |                        |
|  | V  | CLAIMS HI                                 |       |                              | HEST                         |                  | וֹ וֹ |                     | ADDI-                  |                               |                     | ADDI-                  |
| NTC  | •  | REMAINING<br>AFTER<br>AMENDMENT           |       | PREV                         | MBER<br>NOUSLY<br>D FOR      | PRESENT<br>EXTRA |       | RATE                | TIONAL<br>FEE          |                               | RATE                | TIONAL                 |
| AMENDMENT  | Total  | *   | Minus | **                           |                              | =                |       | X\$ 9=              |                        | OR                            | X\$18=              |                        |
| SE SE  | Independent                                    | *   | Minus | ***                          |                              | =                |       | X40=                |                        | OR                            | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |                              |                              |                  |       |                     | <del></del>            | On                            |                     |                        |
| +135=  |  |   |       |                              |                              |                  |       |                     |                        | OR                            | +270=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDIT. FEE ADDIT. FEE ADDIT. FEE    |  |   |       |                              |                              |                  |       |                     |                        |                               |                     |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |       |                              |                              |                  |       |                     |                        |                               |                     |                        |